

List of New Required Data Elements

Listed below are the data elements on the HIPAA X12N 837i institutional and professional health care claim forms that are required, but were not previously required on the electronic Part A (UB92) formats and Medicare Part B (National Standard Format):

Part A 837:

X12 837i transaction overhead information (ST, BHT, Transmission Type REF, HLs, and SE segments, along with numerous qualifiers)

Submitter Identifier (837 overhead info)

Receiver Name

Receiver Identifier

Billing Provider Tax Identification Number or Social Security Number

Note: One of the following is required

- Attending Physician Tax Identification Number or Social Security Number
- Operating Physician Tax Identification Number or Social Security Number
- Other Provider Tax Identification Number or Social Security Number

Payer Identifier

Explanation of Benefits Indicator

Provider or Supplier Signature Indicator

Part B 837:

Receiver name and ID

Submitter Name

Submitter Phone Number

Billing Provider Tax Identification Number or Social Security Number

Pay-To Provider Tax Identification Number or Social Security Number

Rendering Provider Tax Identification Number or Social Security Number

Admission Date for inpatient medical visits